PATENT APPLICATION FEE DETERMINATION RECOR									Application or Docket Number				
Effective October 1, 2003								10766437					
CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2)								SMALL ENTITY TYPE CO			OTHER THAN SMALL ENTITY		
TO	TAL CLAIM	<u> </u>	12	2	. '			RATE	FEE	7	RATE	FEE .	
FOR	B		NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FE	₹ 385.00	700	BASIC FE		
τστ	AL CHARGE	ABLE CLAIMS	27.	2-7 minus 20.		7		XS 9-	1	OR			
BADE	PENDENT (CLAIMS .	4	4 minus 3 =		• }		X43=	+-	1	X86=	-	
MILITIPLE DEPENDENT CLAIM PRESENT								 	. OR				
* If the difference in column 1 is less than zero, enter "0" in column 2								•145=	 	OR	+290=		
CLAIMS AS AMENDED - PART II								TOTAL	<u></u>	JON	TOTAL		
- T	(Cotumn 1) (Cotumn 2) (Column 3)							SMALL	ENTITY	OR	SMALL		
AMENDMENT A	·	REMADEING AFTER AMENDMENT		NUMS PREVIOU PAID F	er USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	dal	.21	Minus	-		. 7		X\$ 9=		OR	X\$18=		
A E	RST PRES	NTATION DE N	Minus	DENDENT CLAN		- /		X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=		
•								TOTAL		00	TOTAL		
<u>.</u>		Æ	XXII. FEE	 _		ODIT. FEE							
AMENDMENT 6	10-20a	CLAIMS REMAINING AFTER AMENDMENT		HIGHE MUMBE PREVIOU PAID FO	ir ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	ſ	RATE	ADDI- TIONAL FEE	
Ž Ta	tel	. 21	Minus	-2'	7	-		X\$ 9-		OR	XS18•		
A 100	ependent	- 4	Minus	1-4		•		X43=	- /	OR	X86±		
FIRST PRESENTATION OF MULTIPLE DEPENDENTICLAIM								145=	7	OR	,290a		
1-10-06								TOTAL		08 . 08 .	TOTAL		
/-	10-1	ADI	DIT. FEE L		A PI	DOIT. FEEL							
٠,٠		(Column 1) CLAIMS REMARKING		(Column HIGHES NUMBE		(Column 3)			ADDI-	Г		400	
		AFTER AMENDMENT		PREVIOUS PAID FO	ELY	PRESENT EXTRA	F	MTE	TIONAL FEE		RATE	ADDI- TIONAL	
Total		· 2'/	Minus	-27	7		×	S 9»	$\neg \neg$	DA T	XS18=	FEE.	
	ST OPERED	y	Minus	- 4		• –	 	43=		~ }	X86-		
- Provident	THE SENTITION OF MULTIPLE DEPENDENT (LAIM									78	~~~		
If the entity in column 1 is less than the entity in column 2 with 10 is onlying 3											+290=		
- B 678	Tichesi Num	ber Previously Pai	I FOR IN THE	S SPACE is les		20. enter "20."	ADD	TOTAL IT. FEE		A AD	TOTAL OIT. PEE		
- COUNTY	-Anest sottion	er Previously Pald	FOT (TOTAL OF	independent)	is the N	Chest unitibes t	ourd à	n ine app ro	opriste box û	COLUM	3 0 1.	l	

H. U.S. DEPARTMENT OF COM